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APPLICANTS

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** CONTINUING DATA *****

None, Ro

** FOREIGN APPLICATIONS *****

None, Ro

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 1	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>Ben Ro</u> Initials				

ADDRESS

22844

TITLE

DIAGNOSTIC METHOD FOR AN ELECTRIC DRIVE ASSEMBLY

FILING FEE RECEIVED 1302	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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